

Fill in this information to identify your case:

|  |                |                                 |           |
|--|----------------|---------------------------------|-----------|
| Debtor 1   | <b>Clovies</b> | <b>Johnson</b>                  |           |
| First Name   | Middle Name    | Last Name                       |           |
| Debtor 2<br>(Spouse, if filing)                        | First Name     | Middle Name                     | Last Name |
| United States Bankruptcy Court for the: <b>Eastern</b> |                | District of <b>Pennsylvania</b> |           |
| Case number (if known) <b>24-12212</b>                 |                |                                 |           |

Check if this is an amended filing

Official Form 106DSchedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

## 1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

## Part 1: List All Secured Claims

| 2.1 | List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.   | Column A<br>Amount of claim<br>Do not deduct the value of collateral.   | Column B<br>Value of collateral that supports this claim | Column C<br>Unsecured portion<br>If any |                    |  |
|-----|---|---|--|---|--------------------|--|
| 2.1 | <b>Ford Motor Credit Company, LLC</b><br>Creditor's Name<br><b>c/o AIS Portfolio S</b><br><b>4515 N Santa Fe Ave Dept APS</b><br>Number Street<br><b>Oklahoma City, OK 73118-7901</b><br>City State ZIP Code  | Describe the property that secures the claim:<br><b>2019 Lincoln Navigator</b>  | <b>\$64,966.58</b>                                       | <b>\$37,477.00</b>                      | <b>\$27,489.58</b> |  |
|     | Who owes the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim relates to a community debt               | As of the date you file, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed |  |   |                    |  |
|     | Nature of lien. Check all that apply.<br><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)<br><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)<br><input type="checkbox"/> Judgment lien from a lawsuit<br><input type="checkbox"/> Other (including a right to offset) |   |  |   |                    |  |
|     | Date debt was incurred <b>10/1/2022</b>   | Last 4 digits of account number   | <b>9 1 4 8</b>   |   |                    |  |
|     | Add the dollar value of your entries in Column A on this page. Write that number here:  |   |  | <b>\$64,966.58</b>                      |                    |  |

Debtor 1

Clovies

First Name

Middle Name

Last Name

Case number (if known) 24-12212

Additional Page

After listing any entries on this page, number them beginning with 2.3,  
followed by 2.4, and so forth.

|  | Column A<br>Amount of claim<br>Do not deduct the<br>value of collateral. | Column B<br>Value of collateral<br>that supports this<br>claim | Column C<br>Unsecured<br>portion<br>If any |
|--|--|--|--|
|--|--|--|--|

|  |   |   |  |
|--|---|---|--|
| Part 1:  | Additional Page   |   |  |
| After listing any entries on this page, number them beginning with 2.3,<br>followed by 2.4, and so forth.                        |   |   |  |
| 2.2  | <b>Navy FCU</b><br><br>Creditor's Name<br><br><b>Attn: Bankruptcy</b>   | Describe the property that secures the claim:<br><br><b>2014 Harley-Davidson Street Glide</b>   | <b>\$9,841.77</b> <b>\$9,895.00</b> <b>\$0.00</b>  |
|  | <b>PO Box 3000</b><br><br>Number Street<br><br><b>Merrified, VA 22119</b>   | As of the date you file, the claim is: Check all that apply.<br><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed   |  |
|  | City State ZIP Code   | Nature of lien. Check all that apply.<br><br><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)<br><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)<br><input type="checkbox"/> Judgment lien from a lawsuit<br><input type="checkbox"/> Other (including a right to offset)<br><b>Money Loaned</b>                 |  |
|  | Who owes the debt? Check one.<br><br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim relates to a community debt |   |  |
|  | Date debt was incurred <u>5/1/2021</u>  | Last 4 digits of account number <u>2 3 3 0</u>  |  |
| 2.3  | <b>Navy FCU</b><br><br>Creditor's Name<br><br><b>Attn: Bankruptcy</b>   | Describe the property that secures the claim:<br><br><b>Secured Funds (Navy FCU)</b>  | <b>\$1,587.28</b> <b>\$1,542.00</b> <b>\$45.28</b> |
|  | <b>PO Box 3000</b><br><br>Number Street<br><br><b>Merrified, VA 22119</b>   | As of the date you file, the claim is: Check all that apply.<br><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed   |  |
|  | City State ZIP Code   | Nature of lien. Check all that apply.<br><br><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)<br><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)<br><input type="checkbox"/> Judgment lien from a lawsuit<br><input checked="" type="checkbox"/> Other (including a right to offset)<br><b>Share Pledge Loan</b> |  |
|  | Who owes the debt? Check one.<br><br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim relates to a community debt |   |  |
|  | Date debt was incurred _____  | Last 4 digits of account number <u>3 5 2 8</u>  |  |
| Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$11,429.05</u>                        |   |   |  |
| If this is the last page of your form, add the dollar value totals from all pages.<br>Write that number here: <u>\$76,395.63</u> |   |   |  |

Fill in this information to identify your case:

|   |   |                |           |
|---|---|----------------|-----------|
| Debtor 1                                | <u>Clovies</u>                          | <u>Johnson</u> |           |
|   | First Name                              | Middle Name    | Last Name |
| Debtor 2<br>(Spouse, if filing)         | First Name                              | Middle Name    | Last Name |
| United States Bankruptcy Court for the: | <u>Eastern District of Pennsylvania</u> |                |           |
| Case number<br>(if known)               | <u>24-12212</u>                         |                |           |

Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No  
 Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petitioner's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Clovies Johnson  
Clovies Johnson, Debtor 1

Date 09/23/2024  
MM/ DD/ YYYY